



2013

# LABORATORY REPORTING OF NOTIFIABLE CONDITIONS

MAINE CENTER FOR DISEASE CONTROL AND PREVENTION



# HAEMOPHILUS INFLUENZA TITIS A HEPATITIS B HEPAT LISTERIOISIS ANAPLASMO BAB **IMPORTANT** ANTHRA TULAREMIA **PHONE** POISC ULIS **NUMBERS** DIPHTHERI RIDIOSIS EPHRILGHOSIS ST ORRHAE FEVER TULARE FLUEN ANTAVIRUS PU HEPAT HIV AIDS LEG PLASM BOVIRAL IN SIOSIS BRAX PERTUSS LIOID PSITTA CHLAMYDIA Q FEV SIS STELLERSE E. COLI LARE RUS AIDS VIRAL PERTU LOBAT TRACH JAKOB DISEASE CRYPTOS

## **Disease Reporting and Consultation Line 800-821-5821**

Healthcare Associated Infections Program

**207-287-6028**

**207-287-8186** (fax)

HIV, STD and Viral Hepatitis Program

**207-287-3747**

**207-287-3498** (fax)

Immunization Program

**207-287-3746**

**207-287-8127** (fax)

Infectious Disease  
Epidemiology Program

**800-821-5821**

**800-293-7534** (fax)

Tuberculosis Control Program

**207-287-5194**

**800-293-7534** (fax)

## **Health and Environmental Testing Laboratory (HETL)**

**207-287-2727**

Bacteriology Section

**207-287-1704**

Molecular/PulseNet Section

**207-287-6366**

TB/Mycology Section

**207-287-1706**

Virology Section

**207-287-1722**

## **Northern New England Poison Control 800-222-1222**



## A NOTE TO OUR COLLEAGUES

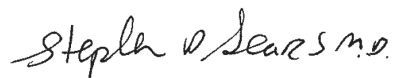
Maine Center for Disease Control and Prevention (Maine CDC) is pleased to provide you with this guide for laboratory reporting of notifiable conditions. We hope you find this guide useful.

Reporting of suspected or confirmed diseases or conditions designated as notifiable is mandated under Maine State Law [22 M.R.S.A., Chapter 250, §820 and §822]. Though the primary responsibility of reporting lies with health care providers, the following entities are also required to report notifiable diseases in Maine: medical laboratories (including blood donor centers and blood banks), veterinarians, veterinary medical laboratories, health care facilities, child care facilities, correctional facilities, educational institutions, and local health officers.

In an effort to assist medical laboratories and blood banks in fulfilling these obligations, Maine CDC has developed this guide for laboratory reporting. This reference provides Maine-specific information on notifiable diseases and conditions, contact information for key personnel and offices, and emergency contact information for after hours calls.

If you require further information or if you have questions or concerns about disease reporting, please call Maine CDC's 24-hour Disease Reporting and Consultation Line at **800-821-5821**. If you would like additional copies of this guide, a PDF version is available on Maine CDC website at [www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/) or can be ordered by calling 800-821-5821.

Partnering for Prevention,

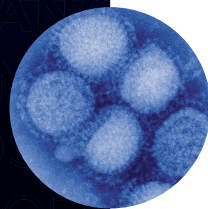


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Maine Center for Disease Control and  
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Director, Maine Health and  
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Maine Center for Disease Control  
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## FREQUENTLY ASKED QUESTIONS



**Q. Are laboratories and blood banks required to report notifiable conditions?**

**A.** Yes, Maine State Law [22 M.R.S.A., Chapter 250, §820 and §822] requires laboratories and blood banks to immediately report the recognition or strong suspicion of the notifiable conditions indicated in this guide to public health authorities at Maine Center for Disease Control and Prevention (Maine CDC).

**Q. To whom should reports of positive lab results or other markers of disease be submitted?**

**A.** All reports should be submitted to Maine CDC. The reports may be made by calling the 24-hour Disease Reporting and Consultation Line at 800-821-5821 or by faxing the report to 800-293-7534.

**Q. When and how should reports be submitted?**

**A.** Notifiable conditions as indicated by the bold text and phone icon on the Reporting Procedures List contained in this guide, must be reported immediately by telephone on recognition or strong suspicion of disease. Non bolded, notifiable conditions require reporting by telephone, fax, or mail as soon as possible, but no later than 48 hours from the time of recognition or strong suspicion of disease. Telephone and fax should be the primary method of reporting. Written reports may be mailed to Maine Center for Disease Control and Prevention, Division of Infectious Disease, 286 Water Street, 11 State House Station, Augusta, ME 04330-0011.

**Q. What information should be provided to the public health authorities?**

**A.** Disease reports must include all pertinent information including: disease or condition diagnosed or suspected; patient's name, date of birth, address, phone number, and race; diagnostic laboratory findings, including test type, and dates of test relevant to the notifiable condition; health care provider name, address, and phone number; and name and phone number of the person making the report. A disease report form is available for download at [www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-form.doc](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-form.doc).

**Q. What is required to be submitted to HETL?**

**A.** The Reporting Procedures Table in this guide contains information about which agents are required by state law to be submitted to HETL. Many clinical laboratories utilize the services of reference laboratories at their discretion. State law requires that isolates or specimens that relate to notifiable conditions, noted as “Yes” in the “Lab Submission of Isolates or Specimens for Confirmation Required” column, must be submitted to HETL, regardless of where the test is performed. Maine laboratories participating in the Federal Laboratory Response Network (LRN) are also required to submit isolates or specimens when specific agents are suspected. For more information please visit the HETL website at [www.mainepublichealth.gov/lab](http://www.mainepublichealth.gov/lab).

**Q. Does HETL participate in any national surveillance systems?**

**A.** Yes. HETL participates in PFGE/PulseNET, Laboratory Response Network (LRN), and Association of Public Health Laboratories (APHL). PFGE/PulseNET is a network of public health laboratories from the United States and Canada that strain type bacteria using pulsed field gel electrophoresis (PFGE). PulseNET allows the linkage of cases and foodstuffs to outbreaks using an electronic database of DNA fingerprints from pathogenic bacteria including shigatoxin producing E.coli, Salmonella, Shigella, Campylobacter and Listeria. For more information visit: [www.cdc.gov/pulsenet/](http://www.cdc.gov/pulsenet/).

LRN is a national network of local, state and federal public health, hospital-based, food testing, veterinary and environmental testing laboratories that provide laboratory diagnostics. The LRN and its partners’ mission is to maintain an integrated national and international network of laboratories that can respond quickly to acts of chemical or biological terrorism, emerging infectious diseases and other public health threats and emergencies.

APHL works to strengthen laboratories serving the public’s health in the US and globally. Their mission is to promote the role of public health laboratories in shaping national and global health objectives, and to promote policies, programs and technologies that assure continuous improvement in the quality of laboratory practice and health outcomes.

**Q. Are physicians required to report notifiable conditions too?**

**A.** Yes, physicians are required to report notifiable diseases to Maine CDC. Information is collected on disease onset, symptoms, treatment, occupation, illness in family members, hospitalization, etc. and supplements the information reported by medical laboratories. Conditions indicated by the bolded text and phone icon on the Reporting Procedures List contained in this guide should be reported immediately upon clinical suspicion.

**Q. Is electronic laboratory reporting of test results available?**

**A.** Yes, electronic laboratory reporting to Maine CDC is available. Currently Maine CDC receives electronic laboratory reports from some national reference laboratories and HealthInfoNet. Conditions indicated by the bolded text and phone icon on the Reporting Procedures List contained in this guide must be reported immediately by telephone upon recognition or strong suspicion of disease prior to availability of test results. Telephone reporting of conditions and paper-based electronic laboratory reporting are still utilized. For more information about implementing electronic laboratory reporting, call the Disease Reporting and Consultation Line at 800-821-5821.

**Q. Is reporting required for agencies that perform donor testing?**

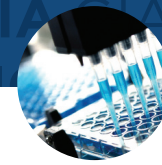
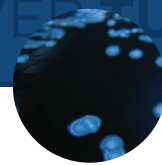
**A.** Yes, blood banks, tissue banks and organ procurement organizations must report positive results of notifiable conditions to Maine CDC.






**Q. Are HIV related tests reportable?**








**A.** Yes, all confirmed positive HIV antibody tests, all results of viral load tests, and all results of CD4 lymphocyte counts are reportable. Reports can be submitted by telephone to 800-821-5821, by fax to 207-287-3498, or by mail to Maine Center for Disease Control and Prevention, HIV Surveillance, 286 Water Street, 11 State House Station, Augusta, ME 04330-0011.



# REPORTING PROCEDURES

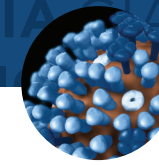
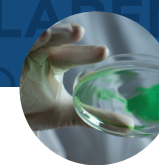








| AGENT  | DISEASE/CONDITION                                  | WHAT TO REPORT TO MAINE CDC                                   | LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED | TESTING PERFORMED AT HETL  |
|--|--|---|---|--|
| <i>Anaplasma phagocytophilum</i>   | Anaplasmosis                                       | Positive by any method  | No  |  |
|  <b>Arboviruses:</b> Eastern or Venezuelan equine encephalitis, Powassan virus, St. Louis encephalitis, West Nile virus | Arboviral infection, viral encephalitis/meningitis | Positive by any method  | No (not required but requested)                                   | IgM performed for Eastern equine encephalitis, St. Louis encephalitis, West Nile virus<br><br>Powassan virus tested at federal CDC |
|  <b>Arenaviruses</b> (Lassa, Junin)   | Viral hemorrhagic fever                            | Positive by any method  | No (not required but requested)                                   | Confirmatory testing may be performed by federal CDC   |
| <i>Babesia microti</i>   | Babesiosis   | Positive blood smear, NAAT or serologic evidence, PCR         | No  |  |
|  <b>Bacillus anthracis</b>   | Anthrax  | Positive by any method  | <b>Yes</b>  | PCR, culture<br>Reportable by LRN  |
|  <b>Bordetella pertussis</b>  | Pertussis  | Positive by any method  | <b>Yes</b>  | PCR, culture   |
| <i>Borrelia burgdorferi</i>  | Lyme disease                                       | ELISA positive or equivocal; Immunoblot positive or equivocal | No  |  |
|  <b>Brucella spp.</b>   | Brucellosis  | Positive by any method  | <b>Yes</b>  | PCR, culture<br>Reportable by LRN  |
| <i>Burkholderia mallei</i>   | Glanders   | Positive by any method  | <b>Yes</b>  | PCR, culture<br>Reportable by LRN  |
| <i>Burkholderia pseudomallei</i>   | Melioidosis  | Positive by any method  | <b>Yes</b>  | PCR, culture<br>Reportable by LRN  |
| <i>Campylobacter spp.</i>  | Campylobacteriosis                                 | Positive by any method  | No  | PCR, culture, PFGE   |
| <i>Carbon Monoxide</i>   | Carbon Monoxide Poisoning                          | Carboxyhemoglobin (COHb) level $\geq 5\%$                     | No  |  |
| <i>Chlamydia psittaci</i>  | Psittacosis  | Positive culture or serologic evidence                        | No  |  |

| AGENT   | DISEASE/CONDITION   | WHAT TO REPORT TO MAINE CDC   | LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED | TESTING PERFORMED AT HETL                            |
|---|---|---|---|--|
| <i>Chlamydia trachomatis</i>  | <i>Chlamydia trachomatis</i> , all genital infections including lymphogranuloma venereum (LGV) and eye infections | Positive by any method  | No  | NAAT   |
|  <b><i>Clostridium botulinum</i></b>       | Botulism  | Positive culture or toxin in blood or stool                         | <b>Yes</b>  | ELISA<br>Reportable by LRN                           |
|  <b><i>Clostridium tetani</i></b>          | Tetanus   | Positive culture  | <b>Yes</b>  | Culture  |
|  <b><i>Corynebacterium diphtheriae</i></b> | Diphtheria  | Positive culture  | <b>Yes</b>  | Culture,<br>DNA sequencing                           |
|  <b><i>Coxiella burnettii</i></b>          | Q fever   | Positive by any method  | <b>Yes</b>  | PCR<br>Reportable by LRN                             |
| Creutzfeldt-Jakob agent   | Creutzfeldt-Jakob Disease   | Positive by any method in patients younger than 55 years of age     | No  |  |
|  <b><i>Cryptosporidium spp.</i></b>        | Cryptosporidiosis   | Positive by any method  | No (not required but recommended)                                 | PCR  |
| <i>Cyclospora</i>   | Cyclosporiasis  | Positive by any method  | No  |  |
| <i>Ehrlichia chaffeensis</i>  | Ehrlichiosis  | Positive by any method  | No  |  |
| <i>Entamoeba histolytica</i>  | Amebiasis   | Positive by any method  | No  |  |
| <i>Escherichia coli</i> , Shiga toxin producing   | Shiga toxin-producing <i>E. coli</i> (STEC) disease   | Positive shiga toxin producing <i>E. coli</i>                       | <b>Yes</b>  | PCR 0157:H7/Shiga toxin1/Shiga toxin2, culture, PFGE |
| <i>Escherichia coli</i> O157  | <i>E. coli</i> O157 disease including hemolytic-uremic syndrome (HUS)   | Positive <i>E. coli</i> O157 culture, positive shiga toxin in stool | <b>Yes</b>  | PCR 0157:H7/Shiga toxin1/Shiga toxin2, culture, PFGE |
|  <b>Filoviruses</b><br>(Ebola, Marburg)  | Viral hemorrhagic fever   | Positive by any method  | <b>Yes</b>  | Performed at federal CDC<br>Reportable by LRN        |
|  <b><i>Francisella tularensis</i></b>    | Tularemia   | Positive by any method  | <b>Yes</b>  | PCR, culture<br>Reportable by LRN                    |
| <i>Giardia lamblia</i>  | Giardiasis  | Positive by any method  | No  |  |
| <i>Haemophilus ducreyi</i>  | Chancroid   | Positive by any method  | No  |  |
| <i>Haemophilus influenzae</i>   | <i>Haemophilus influenzae</i> , invasive disease  | Positive by any method, from invasive site                          | <b>Yes</b>  | Serogroup identification                             |









See inside back cover for key of abbreviations.

# REPORTING PROCEDURES



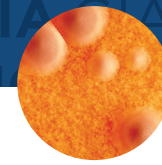
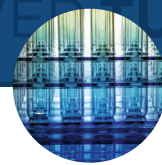
| AGENT  | DISEASE/CONDITION             | WHAT TO REPORT TO MAINE CDC  | LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED | TESTING PERFORMED AT HETL  |
|--|-------------------------------|--|---|--|
| Hantavirus   | Hantavirus Pulmonary Syndrome | Positive IgM or rising IgG titer or positive RNA by NAAT or positive immunochemistry   | No  | Confirmatory testing recommended at federal CDC  |
|  <b>Hepatitis A virus</b>   | Hepatitis A                   | Positive serology for IgM anti-HAV   | No  |  |
|  <b>Hepatitis B virus</b>   | Hepatitis B                   | Positive serology for HBsAg, anti-HBc, IgM anti-HBc, HBeAg or HBV DNA (positive or detectable).  | No  | EIA  |
|  <b>Hepatitis C virus</b>   | Hepatitis C                   | Positive serology for anti-HCV (including signal-to-cut-off ratio for EIA, CIA, MEIA, or CMIA); Positive anti-HCV RIBA; Positive or detectable HCV RNA (PCR, bDNA, TMA), Genotype, and ALT >400 IU/L (in combination with one or more positive or detectable HCV result).  | No  | EIA  |
|  <b>Hepatitis D virus</b>  | Hepatitis D                   | Positive by any method   | No  |  |
|  <b>Hepatitis E virus</b> | Hepatitis E                   | Positive by any method   | No  |  |
| <i>Human Immunodeficiency Virus</i>  | HIV and AIDS                  | Positive results confirmed by supplemental HIV antibody test (e.g. Western blot, IFA), detectable quantities from all HIV nucleic acid detection test results, positive HIV p24 antigen test (including neutralization assay), positive HIV isolation (viral culture). All CD4 counts and viral load test results regardless of quantity or detection levels should be reported by reference laboratories.<br><br>Causative organisms responsible for AIDS defining conditions. ( <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5710a2.htm">www.cdc.gov/mmwr/preview/mmwrhtml/rr5710a2.htm</a> ) | <b>Yes</b> — only applies to HIV antibody test results            | EIA, Multispot   |
|  <b>Influenza, novel</b>  | Influenza, novel              | Positive influenza A, unable to serotype or novel strain   | <b>Yes</b>  | PCR screening A/B and PCR subtyping H1N1, H3N2, H5, culture, Drug Resistance by Pyrosequencing |










| AGENT   | DISEASE/CONDITION                    | WHAT TO REPORT TO MAINE CDC   | LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED | TESTING PERFORMED AT HETL  |
|---|--------------------------------------|---|---|--|
| <i>Legionella spp.</i>  | Legionellosis                        | Positive by any method  | No  |  |
| <i>Leptospira interrogans</i>   | Leptospirosis                        | Positive by any method  | No  | PCR, culture, PFGE   |
| <i>Listeria monocytogenes</i>   | Listeriosis                          | Positive by any method  | <b>Yes</b>  | PCR, culture   |
|  <b>Monkeypox Virus</b>            | Monkeypox                            | Positive by any method  | <b>Yes</b>  | PCR<br>Reportable by LRN   |
|  <b>Mumps virus</b>                | Mumps                                | Paired sera showing rising IgG titer, single serum showing mumps IgM antibody, positive viral culture, RT-PCR   | <b>Yes</b>  | IgG serology, RT-PCR, culture, IgM, ELISA                        |
|  <b>Mycobacterium tuberculosis</b> | Tuberculosis                         | Positive AFB smear (including subsequent culture result), or historic evidence of disease (Negative culture results on follow up specimens must also be reported)<br>Clinical suspicion of active disease | <b>Yes</b>  | AFB smear, culture, drug susceptibilities, genotyping, IGRA, PCR |
| <i>Neisseria gonorrhoeae</i>  | Gonorrhea, Gonococcal conjunctivitis | Positive by any method  | No  | NAAT, culture, DFA   |
|  <b>Neisseria meningitidis</b>     | Meningococcal disease, Invasive      | Positive by culture from any sterile site (such as blood or CSF) or Gram-stain showing Gram-negative diplococci in CSF or blood   | <b>Yes</b>  | PCR, culture, serotyping   |
| Norovirus   | Norovirus                            | Positive by any method  | <b>Yes</b> , for outbreaks and at the request of Maine CDC        | RT-PCR GI/GII  |
| <i>Plasmodium spp.</i>  | Malaria                              | Positive blood smear or NAAT  | No  |  |
|  <b>Polio virus</b>              | Poliomyelitis                        | Positive viral culture or NAAT  | <b>Yes</b>  | Confirmatory testing will be performed by federal CDC            |
|  <b>Rabies virus, animal</b>     | Rabies                               | Domestic animal or human exposure to either high risk wildlife or domestic animals  | <b>Yes</b> , if indicated after consultation with Maine CDC       | DFA  |
|  <b>Rabies virus, human</b>      | Rabies                               | Clinical symptoms consistent with human Rabies virus  | <b>Yes</b>  | Confirmatory testing will be performed by federal CDC            |
|  <b>Ricin Poisoning</b>          | Ricin Poisoning                      | Positive by any method  | <b>Yes</b>  | PCR, TRF-ELISA<br>Reportable by LRN                              |


See inside back cover for key of abbreviations.

# REPORTING PROCEDURES



| AGENT   | DISEASE/CONDITION   | WHAT TO REPORT TO MAINE CDC  | LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED | TESTING PERFORMED AT HETL  |
|---|---|--|---|--|
| <i>Rickettsia rickettsii</i>  | Rocky Mountain Spotted Fever  | Positive by any method   | No  |  |
|  <b>Rubella virus</b>                  | Rubella (German Measles), including congenital  | Paired sera showing rising IgG titer, single serum showing rubella IgM antibody, positive viral culture, RT-PCR  | <b>Yes</b>  | IgG Serology<br>Confirmatory testing will be performed by federal CDC                        |
|  <b>Rubeola virus</b>                  | Measles   | Paired sera showing rise in IgG titer, single serum showing measles IgM antibody, positive viral culture, RT-PCR | <b>Yes</b>  | IgG Serology, RT-PCR   |
| <i>Salmonella</i> species including typhi   | Salmonellosis including Typhoid fever   | Positive culture   | <b>Yes</b>  | Culture, PFGE, serotyping  |
|  <b>SARS Coronavirus</b>               | Severe Acute Respiratory Syndrome (SARS)  | Positive by any method   | <b>Yes</b>  | Confirmatory testing will be performed by federal CDC  |
| Saxitoxin, domoic acid  | Paralytic Shellfish Poisoning   | Positive by any method   | No  | Confirmatory testing may be facilitated in collaboration with Department of Marine Resources |
| <i>Shigella</i> spp.  | Shigellosis   | Positive culture   | <b>Yes</b>  | Culture, serogrouping, PFGE  |
| <i>Staphylococcus aureus</i>  | Methicillin-resistant <i>Staphylococcus aureus</i> , invasive                         | Positive culture from any sterile site (such as blood or CSF)  | No  |  |
|  <b>Staphylococcus aureus</b>        | Staphylococcal disease, Vancomycin intermediate (VISA) or Vancomycin resistant (VRSA) | Positive culture from any site   | <b>Yes</b>  | MecA gene confirmation and vanA gene detection by federal CDC                                |
|  <b>Staphylococcal enterotoxin B</b> | Staphylococcal enterotoxin B poisoning  | Positive for toxin in blood or urine by any method   | No  | TRF-ELISA<br>Reportable by LRN   |
| <i>Streptococcus agalactiae</i> (Group B Strep)   | Group B streptococcal invasive disease  | Positive culture from any sterile site (such as blood or CSF)  | No  |  |

| AGENT   | DISEASE/CONDITION                                | WHAT TO REPORT TO MAINE CDC   | LAB SUBMISSION OF ISOLATES OR SPECIMENS FOR CONFIRMATION REQUIRED | TESTING PERFORMED AT HETL                             |
|---|--|---|---|---|
| <i>Streptococcus pneumoniae</i>   | <i>Streptococcus pneumoniae</i> invasive disease | Positive culture from any sterile site (such as blood or CSF), antibiotic susceptibility pattern must be included | No  |   |
| <i>Streptococcus pyogenes</i> (Group A Beta Hemolytic Strep)  | Group A streptococcal invasive disease           | Positive culture from any invasive site (such as blood or CSF), or any surgical site                              | No  |   |
| <i>Treponema pallidum</i>   | Syphilis   | Positive by any method including RPRs   | <b>Yes</b>  | TPPA, RPR, VDRL (CSF only)                            |
| <i>Trichinella spp.</i>   | Trichinosis                                      | Positive biopsy or serology   | No  |   |
| Vaccinia virus  | Vaccinia infection                               | Positive by any method  | <b>Yes</b>  | PCR<br>Reportable by LRN                              |
| <i>Varicella-zoster</i> virus   | Chicken pox, Shingles                            | Positive by any method  | No  | PCR   |
|  <b><i>Variola virus</i></b>     | Smallpox   | Positive by any method  | <b>Yes</b>  | Confirmatory testing will be performed by federal CDC |
| <i>Vibrio spp.</i> , including cholera  | Vibriosis, including cholera                     | Positive by any method  | <b>Yes</b>  | PCR (cholera only), culture, serogrouping             |
| Yellow fever virus  | Yellow fever                                     | Positive by any method  | No  |   |
| <i>Yersinia pseudotuberculosis</i> and <i>Yersinia enterocolitica</i>   | Yersiniosis                                      | Positive culture  | No  |   |
|  <b><i>Yersinia pestis</i></b> | Plague   | Positive by any method  | <b>Yes</b>  | PCR, culture<br>Reportable by LRN                     |

 **Diseases/conditions indicated with the phone icon and in bold must be immediately reported by telephone to Maine CDC (800-821-5821).**

**AFB** Acid-fast Bacillus  
**CIA** Chemiluminescence Immunoassay  
**COHb** Carboxyhemoglobin  
**CSF** Cerebrospinal Fluid  
**DFA** Direct Fluorescent Antibody  
**EIA** Enzyme Immunoassay  
**ELISA** Enzyme-linked Immunosorbent Assay  
**HAV** Hepatitis A Virus  
**HBc** Hepatitis B Core  
**HBeAg** Hepatitis Be Antigen

**HBsAg** Hepatitis B Surface Antigen  
**HBV** Hepatitis B Virus  
**HCV** Hepatitis C Virus  
**IFA** Immuno Fluorescence Antibody  
**IgG** Immunoglobulin G  
**IgM** Immunoglobulin M  
**IGRA** Interferon Gamma Release Assay  
**LRN** Laboratory Response Network  
**NAAT** Nucleic Acid Amplification Test

**PCR** Polymerase Chain Reaction  
**PFGE** Pulse-Field Gel Electrophoresis  
**RIBA** Recombinant ImmunoBlot Assay  
**RNA** Ribonucleic Acid  
**RPR** Rapid Plasma Reagin  
**RT-PCR** Reverse Transcriptase Polymerase Chain Reaction  
**TPPA** Treponema Pallidum Particle Agglutination  
**TRF** Time Resolved Florescence  
**VDRL** Venereal Disease Research Laboratory Test





**Maine Center for Disease Control and Prevention**

Infectious Disease Epidemiology  
800-821-5821

[www.mainepublichealth.gov](http://www.mainepublichealth.gov)

**Maine Center for Disease Control and Prevention  
(Maine CDC)**

[www.mainepublichealth.gov](http://www.mainepublichealth.gov)

**Infectious Disease Epidemiology Program**

**Disease Reporting**

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting)

**Health and Environmental Testing Laboratory (HETL)**

[www.mainepublichealth.gov/lab](http://www.mainepublichealth.gov/lab)

**Rules for the Control of Notifiable Conditions**

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting/documents/notifiable-conditions.doc](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-conditions.doc) (Word)

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting/documents/notifiable-conditions.pdf](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-conditions.pdf) (PDF)

**Notifiable Conditions List**

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting/documents/notifiable-list.doc](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-list.doc) (Word)

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting/documents/notifiable-list.pdf](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-list.pdf) (PDF)

**Notifiable Conditions Reporting Form**

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting/documents/notifiable-form.doc](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-form.doc) (Word)

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/  
disease-reporting/documents/notifiable-form.pdf](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/disease-reporting/documents/notifiable-form.pdf) (PDF)